Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	12-08-2010	Address:	2000 N Apperson Way
Case #:	<u>161/20146</u>		Kokomo, N
County:	<u>Howard</u>		46901
Type of La	boratory Seizure (check one)	Scizure Location (sheek all that apply)
	onal Lab al/Glassware/Equipment (only) te (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☑ Other: <u>trash</u>
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): couch, living room			
Red Phosphorous/Iodine Reaction(s): N/A			
☐ Flammable Solvents: back utility room			
Water Reactive Metal (Lithium): back utility room			
Anhydrous Ammonia: N/A			
Hydrochloric Acid Gas Generator(s): trash outside			
Corrosive Acid: kitchen			
Corrosive Base: back utility room			
Other (item and location): N/A			
☐ Yes <u>N/</u> ☑ No	r age 18 discovered (check one) A (number present) port to Child Protective Services	Ephedrino Retail/Mo	<u>e Information</u> e/Pseudoephedrine Tracking Log crehant Tip komo DTF investigation
This report is to be faxed to the following agencies that serve the location:			
Fire Departi	nent: <u>Kokomo I'd</u>	Fax: (765)456-7580	
Health Department: Howard Co.		Fax: <u>(76</u> 5)4 Fax:	
Child Protec	etion Service:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Joshua Maller</u> Phone <u>(765) 473-6666</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.